

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	kw	68904	3/15/00
O.I.P.E. CLASSIFIER		16	3/21/00
FORMALITY REVIEW	DP	710208	3/19
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1 ✓	=
2 ✓	=
3 ✓	=
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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